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 | INFORMATIONAL LETTER |
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TRANSMITTAL: 93 INF-2

TO: Commissioners of
 Social Services

DIVISION: Economic
 Security

DATE: January 8, 1993

SUBJECT: Revision of "Shelter Verification" Form (DSS-3668)

SUGGESTED

DISTRIBUTION: Income Maintenance Directors
 Food Stamp Directors
 Medical Assistance Directors
 WMS Coordinators
 Staff Development Coordinators
 Forms Coordinators

CONTACT PERSON: Bob Gullie
 IM/WMS Program Operations, at 1-800-342-3715,
 extension 4-6501

ATTACHMENTS: DSS-3668 (Rev. 11/92): "Shelter Verification" - not
 available on-line

FILING REFERENCES

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Soc. Serv. Law & Other Legal Ref.	Manual Ref.	Misc. Ref.
92 INF-31	92 INF-31			<u>PASB</u> IV-C-2 XIII-D-all iv-31.4 and 31.5 <u>FSSB</u> V-E-1.1 thru 1.4 v-9.4 and v-9.9	

The purpose of this release is to introduce the revised DSS-3668: "Shelter Verification", commonly known as the "Landlord Clearance".

The DSS-3668 is designed to be mailed directly to a landlord: (1) at the time of application, (2) when a change in residence occurs, or (3) at recertification. Its purpose is to verify residency and shelter expenses and, when included in the case record, provide documentation for these eligibility factors.

The use of the DSS-3668 is optional, but its routine use is strongly urged and many local districts have utilized this form since 1985. As a result of their experience with it, local districts and State staff have suggested enhancements which have been incorporated into this version. This latest revision of the DSS-3668 is dated 11/92 (copy attached) and will be available for use by the local districts in March 1993. Below is a detailed summary of the changes from the 4/92 version which were incorporated into this revision.

FACE

The revision date was changed to 11/92.

REVERSE PAGE

1. The revision date was changed to 11/92.
2. Section B, "Shelter Expenses" -

In order to obtain more specific information about "Section 8" subsidies, three subsidy type selections, (certificate, voucher and other), were added to this section.

Delivery of the revised DSS-3668 to the Albany Warehouse is expected in March 1993. Your district will not automatically receive copies. Requests for the DSS-3668 should be submitted on Form WMS-47 (Rev. 9/89): "WMS Order Form" and should be sent to:

New York State Department of Social Services
Welfare Management System
P.O. Box 1990
Albany, New York 12201

Attention: Office of Systems Development (OSD)

You may continue to use the previous (4/92) version of this form until your stock is depleted or until June 30, 1993, whichever occurs first. Reorders will be filled with the 11/92 version.

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Questions concerning ordering forms should be directed to the Office of Systems Development by calling 1-800-342-3715, extension 6-6223.

Oscar R. Best, Jr.
Deputy Commissioner
Division of Economic Security